PLEASE NOTE: YOU MUST 4 **COMPLETE THE FOLLOWING:**

COMBINED DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO. 0033-0694 P

FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor

	matter which is claimed and fo	•	or (if plural inventors are named	below) of the subjec			
Insert Title:	SEMICONDUCTOR DEVI	CE AND METHOD	OF MANUFACTURING T	HE SAME			
Fill in Appropriate	the specification of which is att	ached hereto. If not at	tached hereto.				
Information - For Use Without	, -	Regulations, §1.56. ow and do not believe the same was ever known or used in the United States of America before the same was ever known or used in the United States of America before the same of the patients of the same was not in public use or sited of States of America more than one year prior to this application, that the invention has not made the subject of an inventor's certificate issued before the date of this application in any to the United States of America on an application filed by me or my legal representatives or					
Specification	- .		•				
Attached: O I P	the specification	was filed on		on PCT			
	£/\ -						
JUN 1 8 200							
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To have	including the claims, as amend	reviewed and understa: ed by any amendment i	nd the contents of the above id	entified specification			
RADEMAN	I acknowledge the duty to disclose information which is material to patentability as defined in Title 37						
	Code of Federal Regulations, §	1.56.	•				
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	country foreign to the United S	States of America on an	application filed by me or my le	egal representatives or			
	_	•	is) prior to this application, and				
	-	•	een filed in any country foreign t				
	America prior to this application by me or my legal representatives or assigns, except as follows. I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign						
	, , , , , , , , , , , , , , , , , , , ,	•	ed below and have also identifi				
		•	a filing date before that of the	, ,			
Insert Priority	priority is claimed:						
Information:	Prior Foreign Application (s	s)	,	Priority Claimed			
(if appropriate)	2000-034855(P)	Japan Japan	February/14/2000	⊠ □			
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No			
	(Number)	(Country)	(Month/Day/Year Filed)	U U			
		(002277	(,,,	Yes No			
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No			
	(Number)	(Country)	(Month/Day/Year Filed)				
	(Number)	(Country)	(Mondi, Day, Tear Filed)	Yes No □			
	(Number)	(Country)	(Month/Day/Year Filed)	Yes No			
	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional						
Insert Provisional	application(s) listed below.						
Application(s):	(Application Number)	······································	(Filing Date)	· · · · · · · · · · · · · · · · · · ·			
	(Application Number)		(Filing Date)				
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More Than 12 Months (6						
	Months for Designs) Prior To The Filing Date of This Application:						
Insert Requested Information:	Country	_		of Filing (Month/Day/Year)			
(if appropriate)							
			States Code, §120 of any United				
	•	3	of the claims of this application is by the first paragraph of Title 35				

§112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

Insert Prior U.S.				
Application(s):				
(if any)				

(Application Number)	(Filing Date)	(Status - patented, pending, abandoned)
(Application Number)	(Filing Date)	(Status - patented, pending, abandoned)

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I hereby a point the following attorneys to prosecute this polication and/or an international application based on this a polication and to transact all business in the Pate and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Terrell C. Birch Joseph A. Kolasch Bernard L. Sweeney Charles Gorenstein Leonard R. Svensson Andrew D. Meikle Joe McKinney Muncy C. Joseph Faraci	(Reg. No. 19,382) (Reg. No. 22,463) (Reg. No. 24,448) (Reg. No. 29,271) (Reg. No. 30,330) (Reg. No. 32,868) (Reg. No. 32,334) (Reg. No. 32,350)	Terry L. Clark Marc S. Weiner Andrew F. Reish	(Reg. No. 21,066) (Reg. No. 28,380) (Reg. No. 29,680) (Reg. No. 28,977) (Reg. No. 32,644) (Reg. No. 32,181) (Reg. No. 33,443) (Reg. No. 34,313)
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Send Correspondence to:

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P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

			INVENTOR'S SIGN	NATURE	-	DATE*	
Full Name of First or Sole Inventor:	GIVEN NAME	FAMILY NAME	B .			March 26,	2001
Insert Name of Inventor Insert Date This	Masato	SUMIKAWA	Masato	Numikav	VA. CITIZENSHIP	TRATOIT 207	
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Full Name of Third	GIVEN NAME	FAMILY NAME	INVENTOR'S SIG	NATURE		DATE*	1
Inventor, if any							
see above	Residence (City, Sta	ite & Country)			CITIZENSHIP		
							:
	POST OFFICE ADD	RESS (Complete Street Addres	s including City, Sta	ite & Country)			
•							
m nay	GIVEN NAME	FAMILY NAME	INVENTOR'S SIG	NATURE		DATE*	
Full Name of Fourth Inventor, if any					*		
see above	Residence (City, Sta	ate & Country)	<u> </u>	<u></u>	CITIZENSHIP		
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	GIVEN NAME	FAMILY NAME	INVENTOR'S SIG	SNATURE		DATE*	
Full Name of Fifth Inventor, if any	GIVEIV IV						
see above	Residence (City, St	ate & Country)			CITIZENSHIP	·	
	residence (only, on			•			
	POST OFFICE ADD	RESS (Complete Street Addres	ss including City, Sta	ate & Country)			
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Page 2 of 2 (USPTO Approved 3-90) (Revised 8-97) * DATE OF SIGNATURE